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3753

PTO/SB/21 (08-00)

Approved for use through 10/31/2002. OMB 0651-0031

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/023,607
	Filing Date	12/18/2001
	First Named Inventor	Thorsten Wojciechowski
	Group Art Unit	3753
	Examiner Name	George L. Walton
Total Number of Pages in This Submission		Attorney Docket No. 3954/59156-100

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Charge Deposit Account -08-3460 <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> Affidavits/declarations(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 <input type="checkbox"/> Petition For Revival of an Application for Patent Abandoned Unintentionally Under 37 CFR 1.137(b))	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Request To Rescind Previous Nonpublication Request <input type="checkbox"/> Response to Notice of Allowability <input checked="" type="checkbox"/> Other Enclosure(s): Postcard Receipt
Remarks: <input checked="" type="checkbox"/> Commissioner is hereby authorized to charge fees in this application and any fees which may be required, or any overpayment, to Deposit Account 08-3460. I have enclosed a duplicate copy of this sheet		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual Name	Robert C. Haldiman, Reg. No. 45,437
Signature	
Date	March 22, 2004

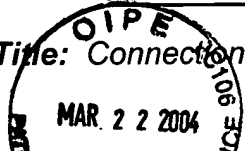
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Typed or printed name	Deborah Lane-Christian		
Signature		Date	3-22-04

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Express Mail No.: EV 342051151 US		Attorney Docket No.	3954/59156-100	First Inventor: Thorsten Wojciechowski
AMENDMENT TRANSMITTAL LETTER  Title: Connection Device and Associated Process			Serial No.	10/023,607
			Filing Date	12/18/2001
			Examiner	George L. Walton
			Group Art Unit	3753

TO THE ASSISTANT COMMISSIONER FOR PATENTS:

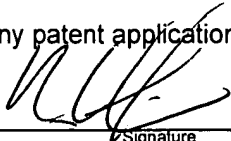

Transmitted herewith is an amendment in the above-identified application.

☒ Large Entity Status☐ Small Entity status of this application has been established under 37 CFR 1.27

The fee has been calculated and is transmitted as shown below.

CLAIMS AS AMENDED - PART II					SMALL ENTITY		OTHER THAN SMALL ENTITY	
	(Column 1)		(Column 2)	(Column 3)	RATE	ADDI-TIONAL FEE	RATE	ADDI-TIONAL FEE
AMENDMENT	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA				
	Total (37 CFR 1.16(c))	18*	Minus	**20	=0	x \$9.00=		x \$18.00=
	Independent (37 CFR 1.16(b))	2*	Minus	***3*	=0	x \$43.00=		x \$86.00=
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					x \$145.00=		x \$290.00=
					TOTAL ADDIT. FEE		TOTAL ADDIT. FEE	0

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
 ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".
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 The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

☐ Petition of Extension of Time.☒ No additional fee is required for amendment.☐ A check in the amount of the fee is enclosed.☐ The Commissioner has already been authorized to charge fees in this application to a Deposit Account. 08-3460.☒ The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 08-3460.
I have enclosed a duplicate copy of this sheet.☒ Any additional filing fees required under 37 C.F.R. 1.16.☒ Any patent application processing fees under 37 C.F.R. 1.17.

 Signature
Date: March 22, 2004
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 I hereby certify that this document and fee is being deposited with the United States Postal Service as "Express Mail" under 37 C.F.R. 1.10 Label No EV 342051151 US on 3-22-04 and addressed to: Mail Stop Non-Fee Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.
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